

Linked-Deposit Program



**SARAH STEELMAN, STATE TREASURER**  
**BIG MISSOURI LINKED DEPOSIT**  
**JOB ENHANCEMENT**  
**LOAN APPLICATION**

**TO BE COMPLETED BY JOB ENHANCEMENT APPLICANT:**

Name of Business: \_\_\_\_\_ Fed Tax I.D.#: \_\_\_\_\_

Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_

County: \_\_\_\_\_ President/CEO: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax #: \_\_\_\_\_

Contact Name and Phone Number: \_\_\_\_\_

Name and Address of Parent Company (if different from above): \_\_\_\_\_

Nature of Business: \_\_\_\_\_ NAICS Code \_\_\_\_\_

Purpose of Loan:
☐ New Business      ☐ Expansion of Existing Business      ☐ Job Retention

Total Cost of Project \$ \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_

Please attach a brief description of the proposal which should include an overview of the company (background and product information, etc.); and an explanation of how the linked deposit will be utilized.

Eligible businesses include new, existing or expanding firms operating in Missouri that annually employ at least 10 permanent, full-time employees and are able to create at least one permanent, full-time job (32 or more hours per week) during the deposit period for each \$25,000 borrowed in the linked deposit program. The same criteria apply for job retention, but documentation will be required to establish "retention." (For example: a letter from an economic development entity stating how they have worked with a particular company and describing how the jobs would be lost to the state.)

NOTE The Treasurer's Office reserves the sole discretion to fund deposits on an annual basis or for multi-year terms. If you are requesting a multi-year loan, please attached a justification based on sound business reasons.

Specific category(ies) of loan use (Check all applicable):

<input type="checkbox"/> Relocation expense	<input type="checkbox"/> Working capital	<input type="checkbox"/> Interim construction
<input type="checkbox"/> Inventory	<input type="checkbox"/> Site development	<input type="checkbox"/> Machinery & equipment
<input type="checkbox"/> Other (Specify) _____		

*(Continued on other side)*

**DEMOGRAPHIC INFORMATION**

Have you participated in the State's linked deposit program previously? ☐ Yes ☐ No

If yes, what time period: \_\_\_\_\_

Please check if you are a Minority-owned firm ☐ and/or a Female-owned firm ☐ (question required by SB 270)

Is applicant using a Small Business Administration (SBA) guarantee for this loan? ☐ Yes ☐ No

Current number of full-time employees \_\_\_\_\_ Current number of part time employees \_\_\_\_\_  
(Minimum of 32 hours per week.) (These employees should not be included in full-time employee number.)

Does this information differ from your last report to the Division of Employment Security regarding number of employees? \_\_\_\_\_

If so, how? \_\_\_\_\_  
\_\_\_\_\_

Does your company combine information for other sites in the state for purposes of reporting to the Division of Employment Security or this location only? (If combined, please list the totals by Missouri cities.)  
\_\_\_\_\_  
\_\_\_\_\_

How many permanent, full-time positions will be created during deposit? Please provide estimated time frame. \_\_\_\_\_

Job titles, wages and descriptions for these positions to be created during deposit? (may include as an attachment) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do these positions have benefits? ☐ YES ☐ NO

If yes, describe \_\_\_\_\_  
\_\_\_\_\_

**The primary purpose of this program is job creation. Therefore, audits will be performed to ensure that the projected number of jobs listed on the borrower's original loan application are created by the company during the deposit period and that loan proceeds are used in accordance with the law. If the borrower does not meet these requirements, the Treasurer will increase the interest rate charged on the deposit to the market rate that would normally be paid on deposits. The lender, in turn, may pass this on to the borrower in the form of an increase in the normal lending rate instead of the reduced interest rate.**

**APPLICATION CERTIFICATION:**

*In submitting this application, I the undersigned eligible borrower have read the following and hereby certify and agree that I meet the following eligibility criteria:*

- |   |  |
|---|--|
| (a) Maintains operations and transacts business in Missouri | <input type="checkbox"/> True <input type="checkbox"/> False |
| (b) Am organized for profit                                 | <input type="checkbox"/> True <input type="checkbox"/> False |
| (c) Employs greater than ten (10) employees                 | <input type="checkbox"/> True <input type="checkbox"/> False |

*(Continued on other side)*

- (d) Do not currently owe any unpaid, non-protested taxes to the State or any political subdivision ☐ True ☐ False  
(NOTE: The State Treasurer's Office may require documentation of payment of taxes or request confirmation of taxes from the State Department of Revenue.)
- (e) Business has no environment compliance issues with MO Department of Natural Resources. ☐ True ☐ False

Please check the box that best applies: (your response will not affect your loan application in any way):

- ☐ YES, I would like to participate in helping Treasurer Steelman promote the BIG Missouri Program with a photograph or press event featuring my farm, business, or project.
- ☐ NO, I would not like to participate in promotional events for BIG Missouri at this time.

*I further certify that I have the requisite authority to complete this application on behalf of the applicant and that by my signature the applicant and all employees of the applicant shall be bound by its terms and the provisions of sections 30.750 through 30.850, Revised Statutes of Missouri. I certify that this linked deposit loan shall be used exclusively for the purposes indicated in this application. I acknowledge that receipt of the reduced interest rate loan applied for herein carries the obligation to create or retain the number and type of jobs described in this application. I agree to immediately notify the State Treasurer if there is a reasonable expectation that the applicant will not be able to create or retain the number and type of jobs described herein. I understand that if the applicant will not be able to or does not meet the job creation/retention projections stated herein, the Treasurer may deem it necessary to modify the amount, term or interest rate of the deposit, as appropriate. In the event that the loan proceeds are not used for allowable operating expenses, the remaining loan proceeds will be immediately returned to the lending institution and any loan proceeds already used shall be repaid to the lending institution as soon as practicable. I understand that the Treasurer may request additional information during the term of the deposit or for a reasonable period thereafter, and agree to respond immediately to all reasonable requests, including preparation of an updated application. I understand that any intentional misrepresentation or misuse of linked deposit loan funds subjects the responsible party to criminal liability, and that I am aware of the Conflict of Interest Policy adopted by the State Treasurer's Office and I comply with that policy. Further, I certify that I am in compliance with all state and federal laws.*

---

(Applicant's Signature)

---

(Title)

---

(Date)

## **BANK CERTIFICATION:**

*After undertaking appropriate review of this loan application, on behalf of the lending institution I find and certify that this applicant is eligible to participate in the BIG Missouri Linked Deposit Program. If the lending institution receives any information during the deposit period which reasonably causes it to question the continued eligibility of this applicant, the institution will immediately notify the State Treasurer and, if requested, the lending institution will re-examine and re-certify the applicant's eligibility. The lending institution further attests that it has no knowledge of any adverse information which would be material to the State Treasurer in determining whether this applicant is an appropriate participant in the BIG Missouri Linked Deposit Program and agrees to immediately notify the State Treasurer if it becomes aware of any such information during the deposit period or for a reasonable time thereafter. The lending institution also hereby acknowledges and reaffirms the terms and conditions previously certified in the Deposit Application for this program.*

*I further certify that the bank is maintaining the documentation that proves eligibility of applicant(s) and can provide this information if requested by the State Treasurer's Office. (Resources that may be used to verify certification includes copies of driver's license (age), tax return (address), financial statement (equity of applicant), and the county appraisal (acreage owned in county)).*

*If deposit amount requested is over \$100,000, the interest rate that would normally apply to this loan is \_\_\_\_\_%.*

For Lender:

---

Signature

---

Title

---

Date